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05-4005 7590 12/20/2002

PERKINS COIE LLP
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Amy Baker

(Depositor's name)

Amy Baker

(Signature)

March 20, 2003

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/320,609	05/26/1999	JEFFREY WILUSZ	601-1-088N	4962

TITLE OF INVENTION: SYSTEM FOR REPRODUCING AND MODULATING STABILITY AND TURNOVER OF RNA MOLECULES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$640	\$0	\$640	03/20/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
MORAN, MARJORIE A	1631	435-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Perkins Coie LLP

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

UNIVERSITY OF MEDICINE AND DENTISTRY
 OF NEW JERSEY

New Brunswick, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☒ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

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Reg No. 46,962 (Date)

Rebekka C. Noll March 20, 2003

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03/31/2003 MBERHE1 00000021 09320609

01 FC:2501

650.00 OP

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Repln. Ref: 03/31/2003 MBERHE1 0016320600

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